(Print Name of lobbyist)

PLEASE PRINT

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 19 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s	$\mathbf{\mathcal{G}}$	$\mathbf{\circ}$			
II. Name of lobbyist's	s partnership, firm o	r corporation, if an	ıy:		
(Nam	ne of partnership, firm or	corporation)			
Business Address: (Street)		(Town/City)	(State)	(Zip Code)	
()(Telephone)	()(Fax)	e-mail		
III. This statement co reportable expense tr				nay file a separate report for	
_ All reportable trans	sactions occurring in t	he months prior to t	he reporting date relative to	the following client:	
<u>OR</u>	(Full Name of Client a	s it appears on the Lob	obyist Registration Form)		
All reportable trans unrelated to any partice		t (including the lobb	oyist's family), or the lobbying	ng firm listed below which are	
IV. Date of Report Reports cover: activi	April 26, 2017 []		July 26, 2017 X activity from 4/1/17 to 6/30/17		
,	October 25, 2017 activity from 7/1/17 to 9/30/17		January 31, 2018		
			transactions made since e Secretary of State's Office,		
VI. Check if additions	al reports are attach	ed:			
			le Addendum A- Fees and l		
If you have paid as Expense Reimburseme		oursed expenses, you	ı must file Addendum B – R	eport of Honorariums or	
If you, your firm,	or your family has ma	de political contribu	tions, you must file Addend	um C- Political Contributions	
Sworn Statement/Aff I have read RSA 15, R and complete to the be	SA 15-B, RSA 14-C a	and RSA 664 and he	reby swear or affirm that the	foregoing information is true	
(Signature of lobbyist)	loney	<u></u>	1/17/	1 1	
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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) MONLY MAIDNLY	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
III. Name of Client AFSCME (ouncil 93	Date 7/17/17
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: a) Total of all fees received in this reporting period	relations, or public relations services
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ 16,683.80 d) \$ NA
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ NA
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s) firm aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a busines as than \$10 that is given to the person d with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of the trans \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) S0
a) Total of all itemized expenditures reported in detail in section VI	0.8

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	
f) Total of all expenses year to date	ns0	
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I period, including by whom paid or to whom charged.	obbying fees during this reporting	
Paid to:	Amount:	
N/A	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information	
(Signature of lobbyist)	7/17/17	
Molly Malmu (Print Name of Jobbyist)	(Date)	
(Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmati Statement of Income and E	-	rist	
Name of Lobbying partnership,	firm, or corpor	ration:	
Name of Client (leave blank if Sparticular client): AFSCME		. 🗖	corporation and not related to any
Date of Report (check one):			
April 26, 2017 □ July 2	6, 2017 X	October 25, 2017 □	January 31, 2018 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the complete to the best of my know			nt and each Addendum is true and
(Signature of lobbyist)			7/17/17 (Date)
Molly Malowy (Print Name of lobbyist)			